

Note: The bank needs
a copy of this form,
stamped in the top
right-hand corner,
to open an account
for the campaign.

Aubrey Immanuel

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
FEC MAIL CENTER
2008 SEP -3 AM 9:18

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Immelman for Congress

ADDRESS (number and street)

P.O. Box 117



(Check if address
is changed)

Sartell

MN

56377

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

info@immelman.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.immelman.us

COMMITTEE'S FAX NUMBER - None

2. DATE

08 / 11 / 2008

3. FEC IDENTIFICATION NUMBER

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Pamela Marie Immelman

Signature of Treasurer

Date

08 / 20 / 2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 12/2007)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of
Candidate

Abraham P. (Aubrey) Immelman

Candidate
Party Affiliation

REP

Office
Sought:☒

House

Senate

President

State

MN

District

06

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate**Party Committee:**

- (d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

☐ Corporation☐ Corporation w/o Capital Stock☐ Labor Organization☐ Membership Organization☐ Trade Association☐ Cooperative

- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser1. ☐ FEC ID number2. ☐ FEC ID number3. ☐ FEC ID number4. ☐ FEC ID number5. ☐ FEC ID number

28039823585

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

None

Mailing Address

CITY

STATE

ZIP CODE

Relationship:

☒ Connected Organization☐ Affiliated Committee☐ Leadership PAC Sponsor☐ Joint Fundraising Representative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

320 - 240 - 6828

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

Pamela Marie Immelman

Mailing Address

P.O. Box 117

Sartell

CITY

MN

STATE

56377

ZIP CODE

Title or Position

Treasurer

Telephone number

320 - 240 - 6828

Full Name of
Designated
Agent

Patrick Robert Forte

Mailing Address

97 - 8th St. N.

Sartell

CITY

MN

STATE

56377

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

320

203

8618

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Wells Fargo Bank, N.A.

Mailing Address

Sartell Office

809 - 10th Ave N.

Sartell

CITY

MN

STATE

56377

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☒ USPS First Class Mail	Postmarked
☐ USPS Registered/Certified	Postmarked (R/C)
☐ USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label ☐	
☐ USPS Express Mail	Postmarked
☒ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery ☐	
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked


PREPARER
(3/2005)

9/3/08
DATE PREPARED

28039823588